
What is the Patient Review and Restriction (PRR) Program?

The Patient Review and Restriction (PRR) program is a federal and state Medicaid requirement to control over-utilization and inappropriate use of medical services by clients. This requirement allows restriction of clients to certain providers including Primary Care Providers (PCP), pharmacies, and hospitals. Dual eligible (Medicare/Medicaid) clients can only be restricted to a pharmacy and not a PCP or hospital. The WAC covering PRR is 388-501-0135.

The PRR program focuses on the health and safety of these clients. Many of the clients are seen by several different prescribers, have a high number of duplicative medications, use several different pharmacies, as well as have a high emergency room usage. Based on clinical and utilization findings, clients are placed in the PRR program and restricted for at least two years.

Clients can be restricted to one primary care provider, one pharmacy, one hospital for non-emergent care and/or a combination of these providers. Clients who have been on the PRR program have shown a 48% decrease in emergency use; a 41% decrease in physician visits; and a 29% decrease in the number of prescriptions.

The clients in this program are required to select a primary care provider, a pharmacy, and a hospital for non-emergency care; otherwise MAA will assign primary providers to them.

What is your role in the PRR program?

The primary pharmacy is a key player in managing the client's prescriptions. You will be able to alert the client's PCP or MAA's PRR staff, of misuse or potential problems with the client's prescriptions.

A major focus of the PRR program is education. Educating the client on appropriate use of prescriptions, drug interactions, relevance of maintaining one PCP and pharmacy to manage and monitor one's care are key elements in helping the client appropriately utilize services.

PRR staff will keep you updated on the client's utilization of services that may be impacting the pharmacy visits.

Do all prescriptions require prior authorization?

No. All pharmacy policies remain in effect. However, if the client goes to a non-assigned pharmacy, the POS system will have edits in place rejecting the claim.

If a client goes to a non-assigned pharmacy, the pharmacist may:

- Refer the client back to their assigned pharmacy.
 - Call the PRR referral line during regular business hours (Monday-Friday, 8 AM – 5PM) at (360) 725-1780 to request an override.
 - At their discretion in an emergent situation, pharmacist may fill the prescription drugs. Justification for the emergency fill must be provided to the PRR program the next business day in order for an override to be completed. (See Q & A on “if a client has an emergency.”)
 - If it's not an emergent situation, the pharmacist can ask the client to pay cash. However, the client should sign a “non-covered waiver,” otherwise the pharmacy may have to refund the money back to the client.
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How will other practitioners know the client is on restriction?

The client's Medical Identification Card will have an "X" in the RESTRICTION column and the words "Client on Review" is also printed on the coupon. This alerts providers that the client is restricted to specific providers and they should ascertain from either the client or MAA details of the restriction.

The Point of Sale (POS) system will indicate the client is restricted.

How will I know which PCP or hospital the client has been restricted to?

You will receive a copy of the client's letter notifying the client of the restricted PCP and hospital. Any changes made to the PCP or hospital will be made in writing to the client, with a copy sent to you, as the primary pharmacy.

What if the client has an emergency?

Washington State has the "prudent layman's" law, in which clients can go to the emergency room, *if they think* they have a problem and must be seen by the emergency room staff. However, Emergency room prescriptions cannot be overridden in the POS system by non-assigned PRR pharmacy. The non-assigned pharmacy must call the Exception Case Management Section and talk to the PRR program manager, who will review the request in coordination with clinical staff and the client's PCP to determine approval of prescription.

In addition, if the client is also on the Disease Management Program (client has a diagnosis of Diabetes, Congestive Heart Failure, or Asthma) the client has access to the 24 hour CareEnhance Nurse Advice line at 1-800-444-0125 for health care advice. This resource has been successful in triaging client's needs.

How long will I be assigned to the PRR Client?

The client is restricted to the PRR program for a minimum of two years. You can terminate the relationship as primary pharmacy to the PRR client at any time and it will not affect your relationship with MAA or your other MAA clients. However, you need to give the PRR client a 30-day notice and also notify us at the Exception Case Management Section, so that we can help the client find another pharmacy. The client may also choose another pharmacy after 12 months on the program.

How to contact ECM for any questions, concerns:

Exception Case Management Section
PO Box 45532
Olympia, Washington 98504-5532
1-800-794-4360, ext. 51780 or (360) 725-1780.